



# **TRICARE SEA-UP-DATE**

## **TRICARE Management Activity**

**SGM Harry Robinson, Jr.**  
**Senior Enlisted Advisor TMA**  
**27 August 2002**



# Objectives

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- Discuss the HA/TMA-SEA view on MHS
- Discuss the importance of TMA and the SEA perspective on Sr. NCOs key issues
- Provide information for your toolbox



# Our Promise Kept

# Our Nation Calls



2002 TRICARE Stakeholders' Report  
Volume IV





# Rising Costs of Health

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**New York Times, July 19, 2002**

**“Questioning \$1 Million Fee in  
a Needle Deal”**

**By Barry Meier with Mary Williams Walsh**

-A hospital purchasing group that buys medical supplies for a third of the nation's hospitals apparently received two unusual payments totaling \$1.1 million from a company that had the exclusive rights to market hypodermic needles to the group's hospitals.

**New York Times, July 26, 2002**

**“Medicare Drugs for Those in  
Need Sway Democrats in Senate”**

**By Robert Pear**

-Many Senate Democrats are abandoning their earlier proposal on prescription drugs to support a less expensive bipartisan proposal they had rejected as inadequate only 10 days ago.



# TRICARE Goals

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- Improve Medical Readiness
- Improve Access
- Maintain High Quality
- Contain Costs

**RECRUITMENT**



**T R I C A R E**

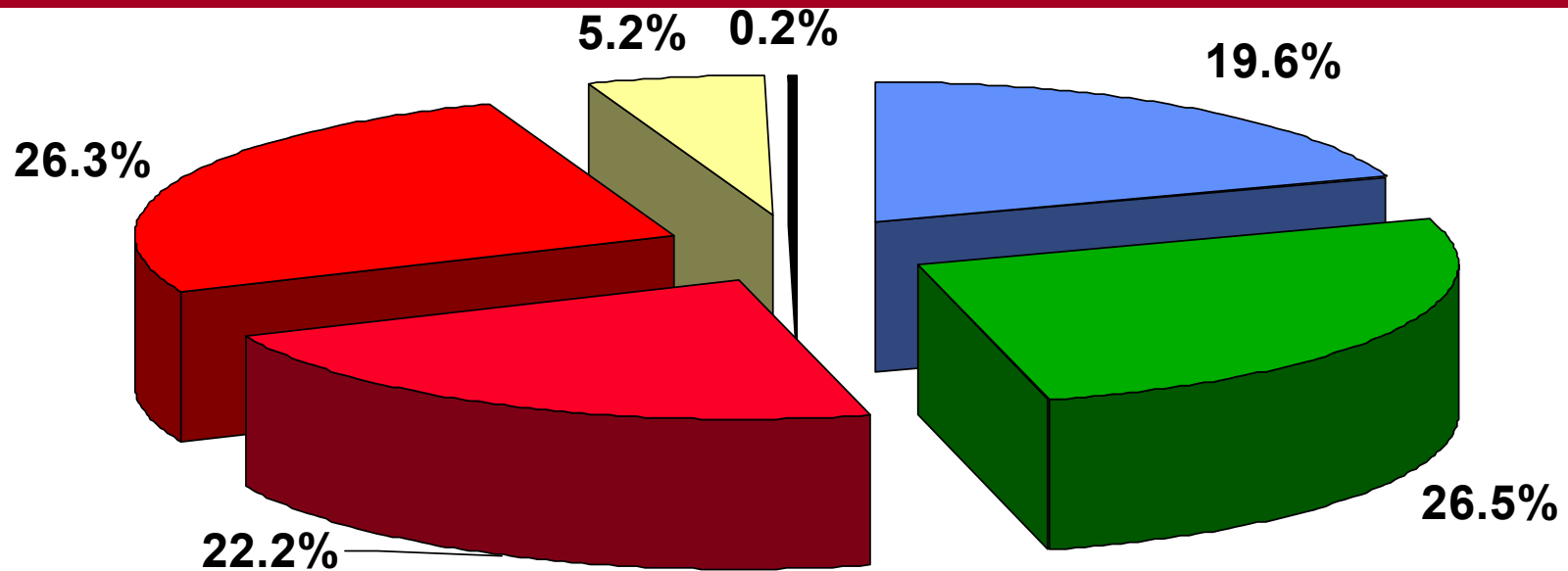
**= READINESS**







**RETENTION**

**RETIREMENT**



# MHS Beneficiary Population by Beneficiary Category



|   | Beneficiary Category            | Population Count | % of Total Population |
|---|---------------------------------|------------------|-----------------------|
|    | Active Duty/Guard               | 1,704,537        | 19.6%                 |
|   | Dependents of Active Duty/Guard | 2,302,945        | 26.5%                 |
|  | Retirees                        | 1,933,604        | 22.2%                 |
|  | Dependents of Retirees          | 2,287,096        | 26.3%                 |
|  | Dependents of Survivors         | 452,469          | 5.2%                  |
|  | Other                           | 20,813           | 0.2%                  |
|   | <b>Total</b>                    | <b>8,701,464</b> | <b>100%</b>           |



# ***Fast Facts for Leaders***



- 
- TRICARE Costs: Successfully holding the line on both beneficiary and Government costs
  - TRICARE Quality: Outstanding
  - TRICARE Access: Good and getting better
  - TRICARE Satisfaction: Good and getting better
  - TRICARE Benefit: One of the most comprehensive health benefit plans in the US
  - TRICARE Improvements: Steady, accountable, proven track record of improvement



# **“Veterans Return to Active Duty for Security and Stability of Navy Life”**

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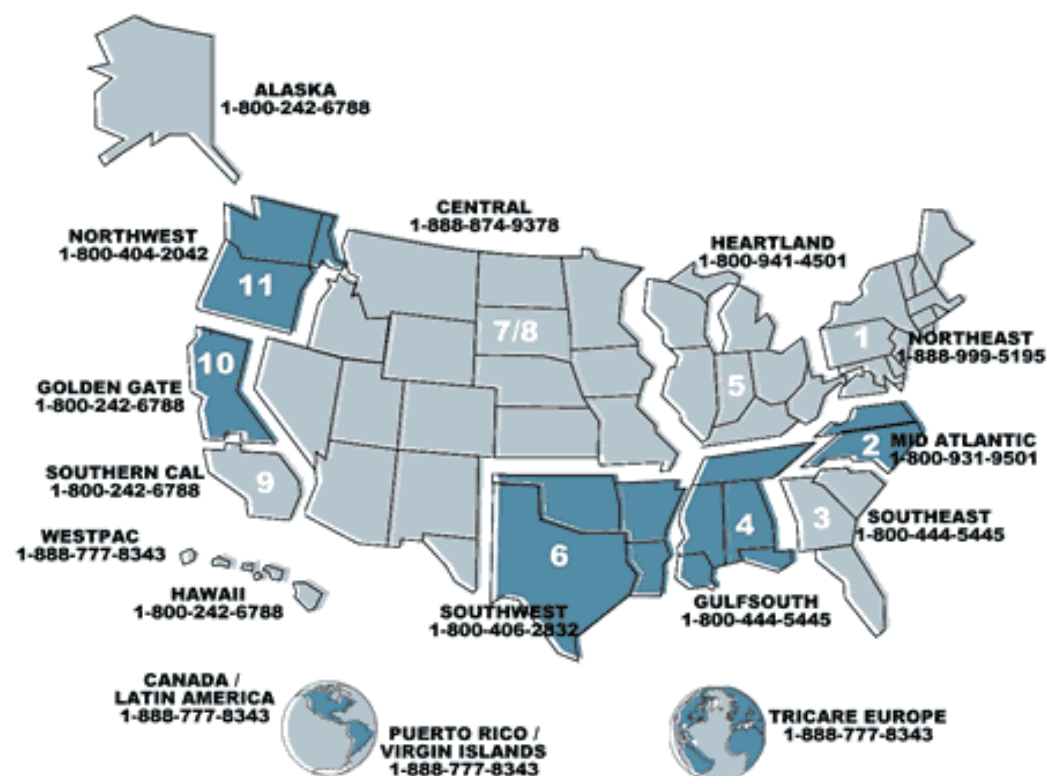
*“I have three kids, and was spending \$250 a week in day care, which is \$1,000 a month. Add to that health insurance, which was another \$400-500 a month to cover a family the way you’d want to. Retirement was whatever you could manage to save.”*

- SN John Taylor,  
former real estate agent



**"Can you hold your horses while we argue over who should help you?"**

# TRICARE Regions at a Glance



| Region   | Telephone                                |
|--|--|
| <a href="#">Northeast (1)</a>                    | 888-999-5195                             |
| <a href="#">Mid-Atlantic (2)</a>                 | 800-931-9501                             |
| <a href="#">Southeast (3)</a>                    | 800-444-5445                             |
| <a href="#">Gulfsouth (4)</a>                    | 800-444-5445                             |
| <a href="#">Heartland (5)</a>                    | 800-941-4501                             |
| <a href="#">Southwest (6)</a>                    | 800-406-2832                             |
| <a href="#">Central (7&amp;8)</a>                | 888-874-9378                             |
| <a href="#">Southern California (9)</a>          | 800-242-6788                             |
| <a href="#">Golden Gate (10)</a>                 | 800-242-6788                             |
| <a href="#">Northwest (11)</a>                   | 800-404-4506; 1-800-242-6788-Alaska only |
| TRICARE Pacific                                  |  |
| <a href="#">Hawaii</a>                           | 800-242-6788                             |
| <a href="#">WESTPAC</a>                          | 888-777-8343                             |
| <a href="#">Latin America &amp; Canada</a>       | 888-777-8343                             |
| <a href="#">Puerto Rico &amp; Virgin Islands</a> | 888-777-8343                             |
| <a href="#">Europe</a>                           | 888-777-8343                             |

[Uniformed Services Family Health Plan](#)

[Continued Health Care Benefit Program \(CHCBP\)](#)

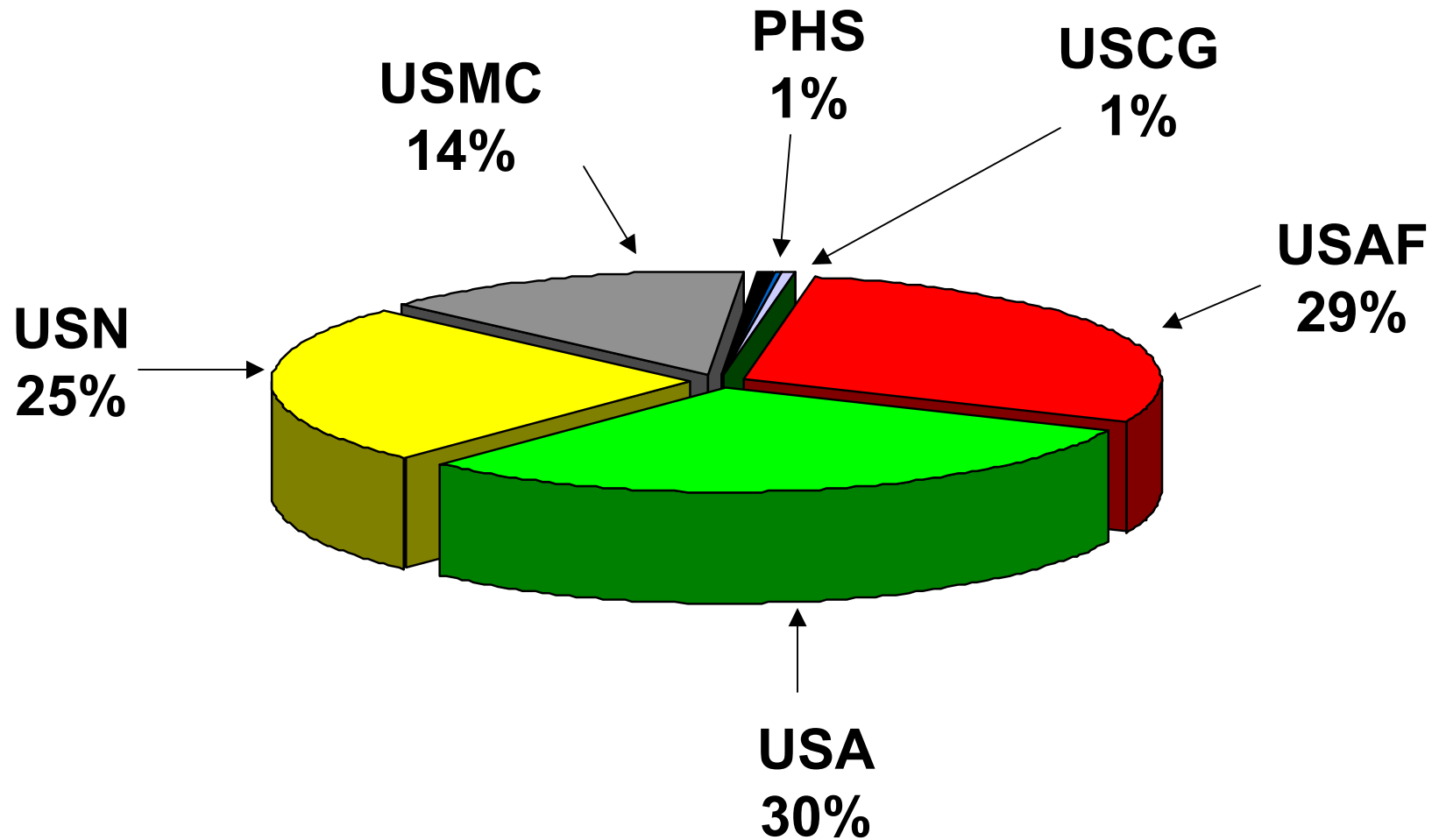
[Toll-Free numbers](#)

# **Beneficiary Counseling & Assistance Coordinator (BCAC) & Debt Collection Assistance Officer (DCAO) Program Update**





# Sponsor Service





**"We really like your complaint. Do you mind if we use it for our 'Stupid Customer Complaint of the Month?'"**

PHARMACY

ARE YOU ANDED  
GOING TO FLORIDA  
THIS WINTER?

NO, WE'RE PAYING  
FOR HIS 2 M.G.  
BETAPHAZATINE  
PILLS INSTEAD.

NO  
SALE  
EVER

PICK-UP HERE





# Uniform Formulary

## Pharmacy Co-pay Structure

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| Point of Service  | Generics   | Brand Name |
|---|--|------------|
| Military Treatment Facility                                 | \$0  | \$0        |
| National Mail Order Pharmacy (up to a <b>90</b> day supply) | \$3  | \$9        |
| TRICARE Retail Networks (up to a <b>30</b> day supply)      | \$3  | \$9        |
| Non-network Pharmacies                                      | \$9 or 20% of total cost (whichever is greater) Existing deductibles apply |            |





# Kaiser Permanente: Personal Advantage Plan

| Services                                | \$10 co-pay option   | \$20/30 co-pay option  | \$25/35 co-pay option   |
|---|--|--|---|
| Primary care                            | 10   | 20   | 25  |
| Specialty care                          | 10   | 25   | 30  |
| Dental services                         | Pay 30 per visit for preventative and diagnostic services          | Not covered  | Not covered   |
| Emergency services (waived if admitted) | 50   | 75   | 75  |
| Vision care (eye exams)                 | 10   | 25   | 30  |
| Prescription drugs                      | Deductible: \$0<br>Generic: \$15<br>Brand: \$25<br>Maximum: \$1500 | Deductible: \$100<br>Generic: \$20<br>Brand: \$30<br>Maximum: \$1000 | Deductible: \$150<br>Generic: \$20<br>Brand: \$30<br>Maximum: \$750 |

Source: \* Major Medical plan as quoted by Kaiser Permanente's website  
[www.kaiserpermanente.org/locations/midatlantic/individualplan/services.html](http://www.kaiserpermanente.org/locations/midatlantic/individualplan/services.html).



# TRICARE Prime: A Superb Health Benefit

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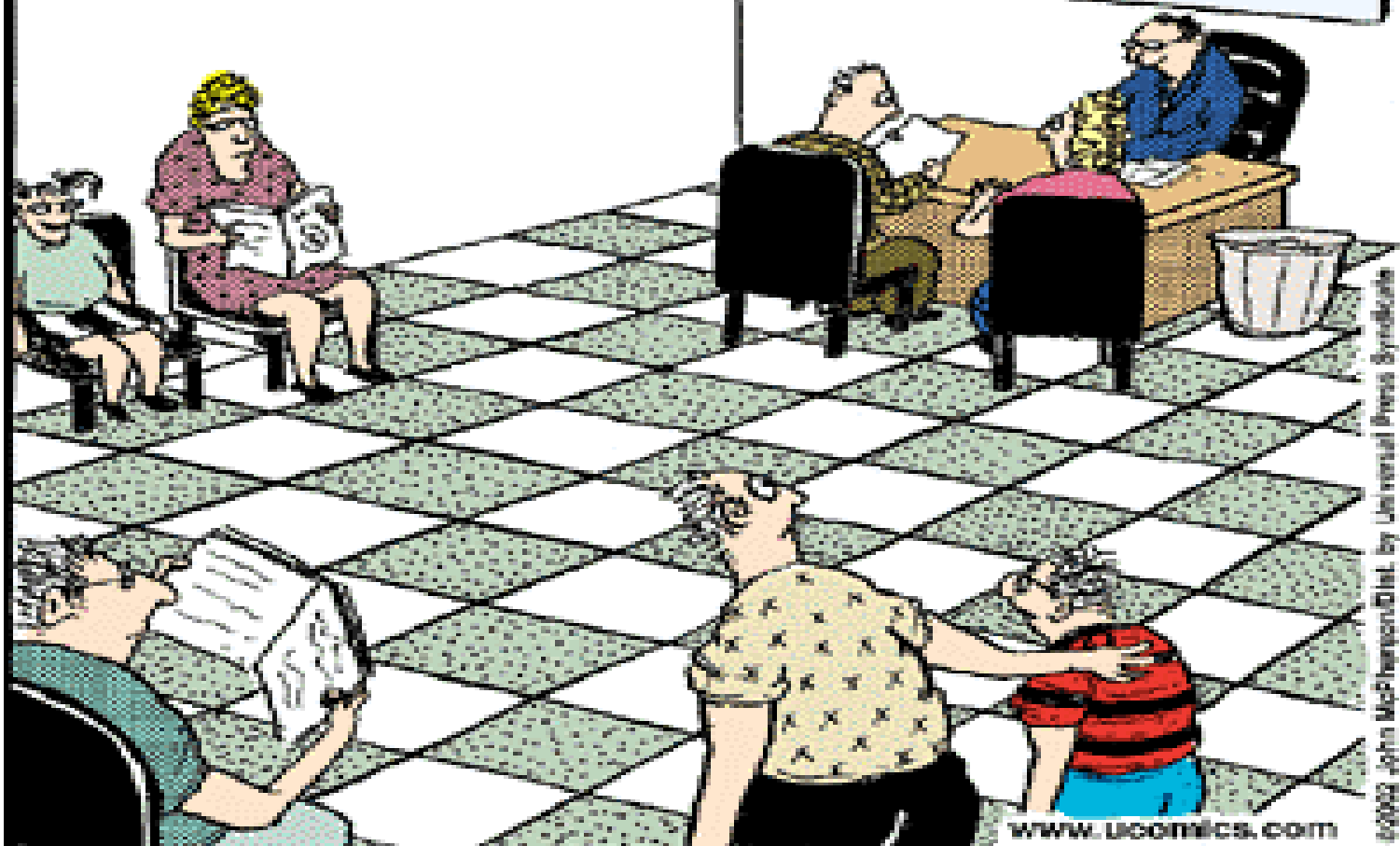
- Prescription Drugs
  - Mail Order Discount Plan
- Vision Benefits
- Mammography
- Mental Health
- Dental
- Skilled Nursing Facility
- Home Health Care

***Superior to Most Civilian Health Plans***

**CLEEBER  
ORTHODONTICS**

**LOAN DEPARTMENT**

**NOW AVAILABLE:  
20-YEAR 8.5% APR**





# A Superb Health Benefit

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**USA Today, July 19, 2002**

**“We need it. Let's do it”**

**By Bob Graham**

- Providing a prescription drug benefit for the nation's seniors will be one of the most significant modernization that can be made in modern healthcare, says Sen. Bob Graham, D-Fla.

***Superior to Most Civilian Health Plans***



# **A Superb Health Benefit**

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**AP/New York Times, July 19, 2002**

**“Senate Begins Prescription  
Drug Debate”**

**By The Associated Press**

- President Bush and congressional Republicans attacked a Democrat-led plan to provide a prescription drug benefit by saying the \$594 billion price tag is too high. The White House supports a smaller, \$370 billion plan devised by a coalition of Democrats and Republicans.

***Superior to Most Civilian Health Plans***



# Rising Costs of Health

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**New York Times, July 19, 2002**

**“Questioning \$1 Million Fee in  
a Needle Deal” By Barry Meier with Mary Williams Walsh**

- A hospital purchasing group that buys medical supplies for a third of the nation's hospitals apparently received two unusual payments totaling \$1.1 million from a company that had the exclusive rights to market hypodermic needles to the group's hospitals.

**Los Angeles Times, July 18, 2002**

**“Study: Drug Makers Focus  
on Promotion” By Ronald White**

- A consumer advocate group blasted holes in a favorite drug industry argument by releasing a study that shows drugmakers spend far more on overhead, lavish executive salaries and marketing campaigns aimed at hospitals and doctors than they do on research and development.



Office of Personnel Management, *Government*  
*Executive Article*, 18 September 2000:



## **“2001 Costs to Rise 10.5% in Federal [Civilian] Health Plan”**

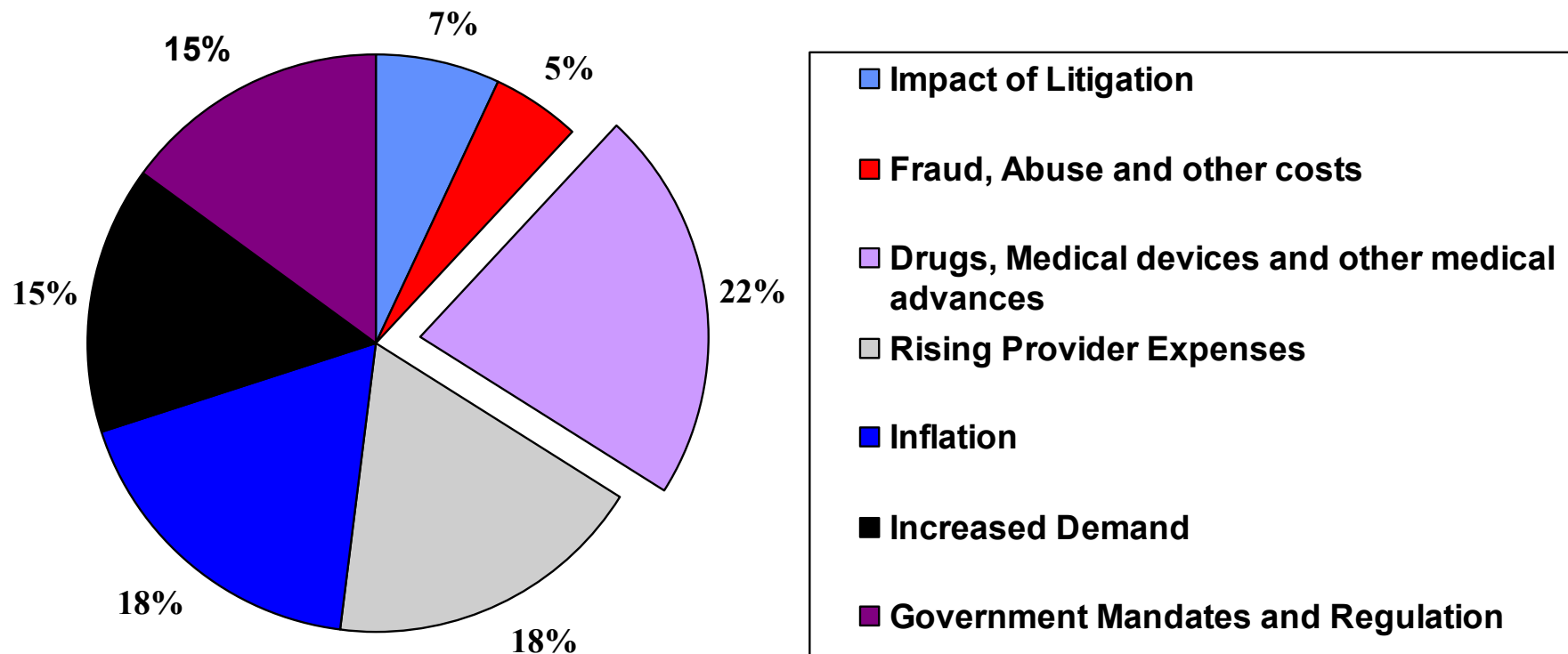
| Premium Increases 1998-2002 |                       |                    |
|-----------------------------|-----------------------|--------------------|
|                             | FEHBP                 | TRICARE            |
| 1998                        | 7.2%                  | 0%                 |
| 1999                        | 9.5%                  | 0%                 |
| 2000                        | 9.3%                  | 0%                 |
| 2001                        | 10.5%                 | 0%                 |
| <b>TOTAL</b>                | <b>36.5% Increase</b> | <b>No Increase</b> |

Source: September 18, 2000, “Health premiums rise even higher than expected” , by Kathy Saldarini  
[ksaldarini@govexec.com](mailto:ksaldarini@govexec.com)



# Health Care Costs

## *Factors contributing to the rising cost in health care insurance premiums*



Source: "Employer Health Costs Rise 10%," Miami Herald, 5/3/2002





# Health Costs Could Double by 2011



- By 2011, Americans are expected to spend \$9,216 per person on health care, about double what they spent in 2000.
- Health Costs are expected to grow at a rate of 7.3% annually between now and 2011.
- Health Care spending could reach \$2.8 trillion, or 17% of the nation's gross domestic product, by 2011, up from 13.2 percent in 2000.
- Spending on prescription drugs, the fastest growing part of health spending, is expected to slow, dropping from 17.3% growth in 2000 to 10.1% in 2011.

Source: Washington Post, 3/11/2002



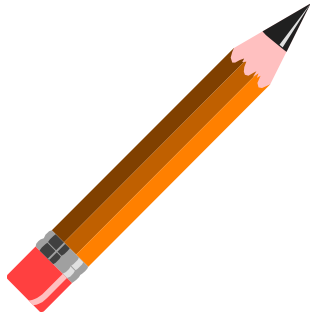
# Where Beneficiaries Go For Help

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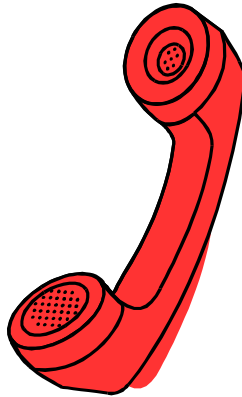


- Local Military Treatment Facility (MTF)
- Local TRICARE Service Center (TSC)
- Beneficiary Counselors and Assistance Coordinators (BCAC)
- Debt Collection Assistance Officers (DCAO)

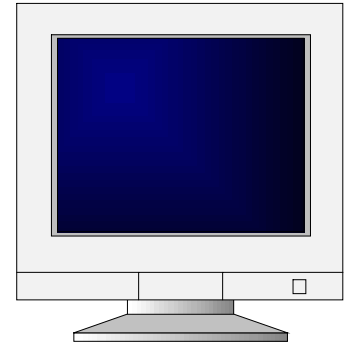
**If you have a...**



,



**or a**



**you have access to  
unlimited, free, accurate  
information about  
TRICARE**



# Access Standards

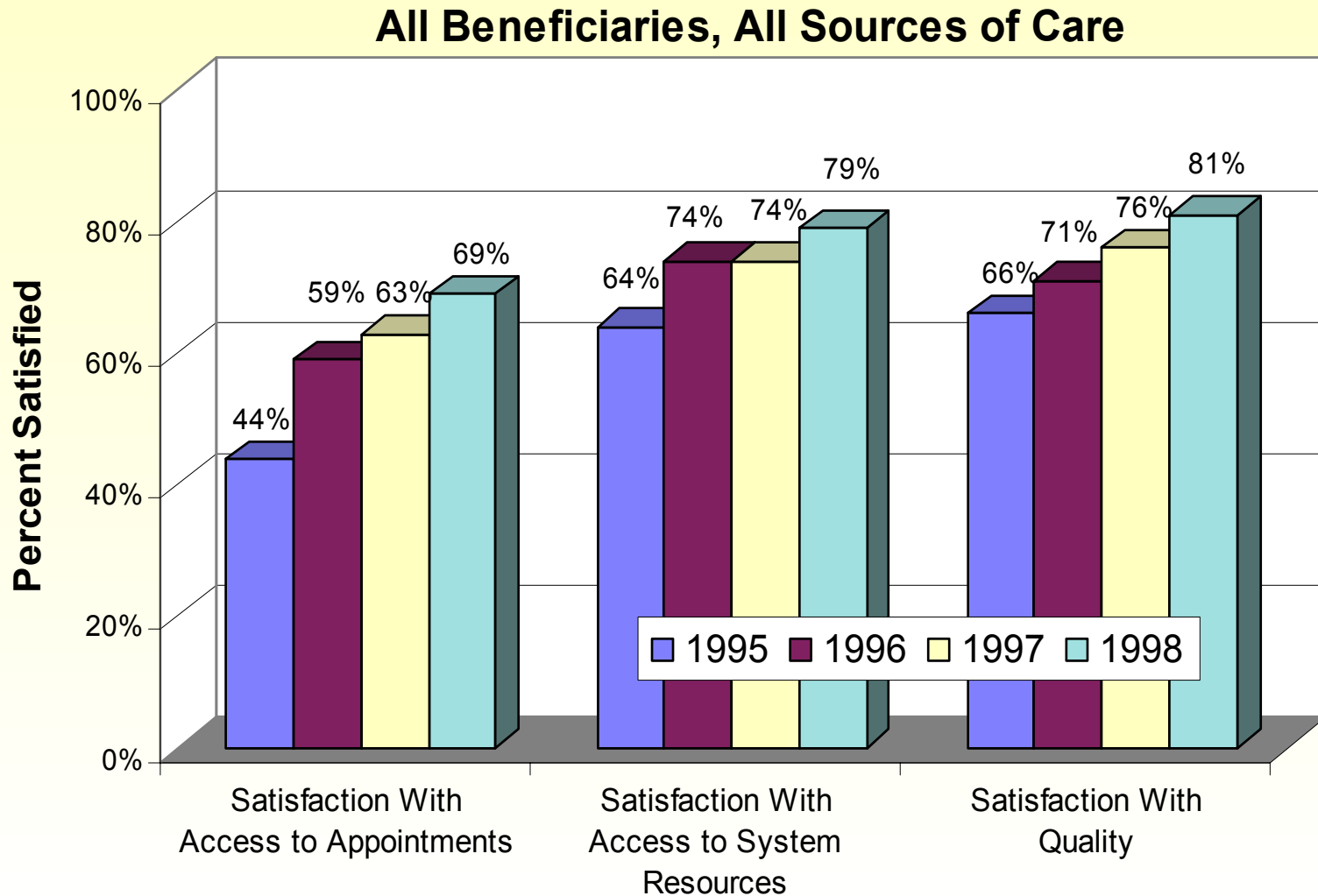
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- **TRICARE Prime Access Standards**
- **Emergency Care (911 or Nearest Emergency Room)**
  - 24 Hours a Day, 7 Days a Week
- **Primary Care Wait Times**
  - 1 Day - Acute Illness
  - 1 Week - Routine Visit
  - 1 Month - Well Visit
- **Well/Specialty Care Wait Times**
  - 1 Day - Urgent Care
  - 1 Month - Routine Visit
- **24 Hour Toll Free Health Care Information Line**
- **24 Hour Toll Free TRICARE Service Line**



# Satisfaction:

## *Moving in the Right Direction*



Source: 1995 - 1998 Annual Health Care Survey of DoD Beneficiaries



# Kaiser Permanente: Quality of Care



| Quality of Care              | Above Average | Average | Below Average |
|------------------------------|---------------|---------|---------------|
| Overall Plan Satisfaction    |               | √       |               |
| Getting Needed Care          |               |         | √             |
| Getting Quick Care           |               | √       |               |
| How Well Doctors Communicate |               |         | √             |
| Customer Service             | √             |         |               |
| Claims Processing            |               |         | √             |

*Source: Data accessed from FEHB of Maryland Quality Information located at this url, [www.opm.gov/insure/02/html/standards/states/md/quality\\_HMO\\_chart.html](http://www.opm.gov/insure/02/html/standards/states/md/quality_HMO_chart.html).*



# Where TFL Beneficiaries Go For Help

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- Senior Pharmacy
  - 1-877-DOD-MEDS
- TRICARE For Life
  - 1--888-DOD-LIFE
- [www.TRICARE.osd.mil](http://www.TRICARE.osd.mil)
- Local MTF
- Retiree Affairs Offices
- National Mil Coalition/Mil Vets Alliance



# NDAA Conclusions

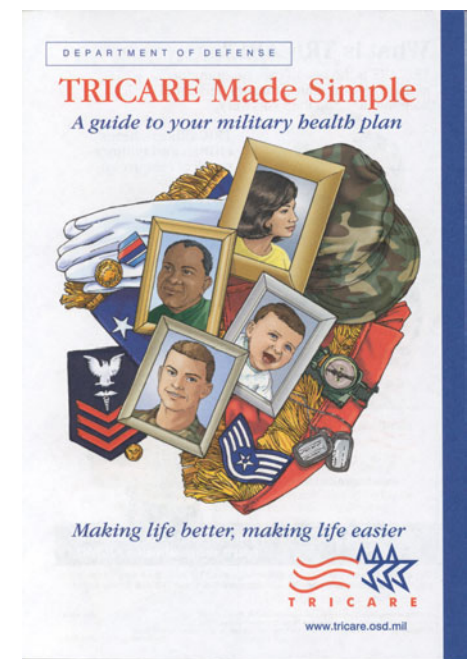
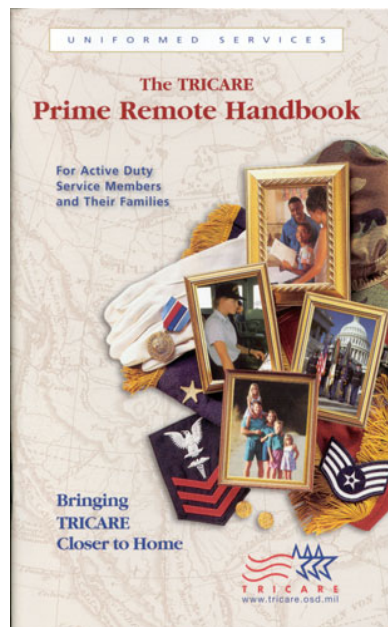
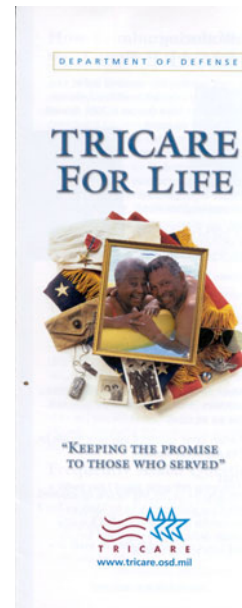


- Major Change in the Military Health Care Benefit
- DoD has Implementation and Contracting Responsibilities
  - Quality Health Care Delivery
  - Public Review and Comment on New Changes
  - Good Steward of Taxpayer Dollars
- More Information will be Released as Quickly as Possible
- Best Info Source Including Latest Version of this Briefing: [www.tricare.osd.mil/ndaa](http://www.tricare.osd.mil/ndaa)





**Leadership**  
**is the key**

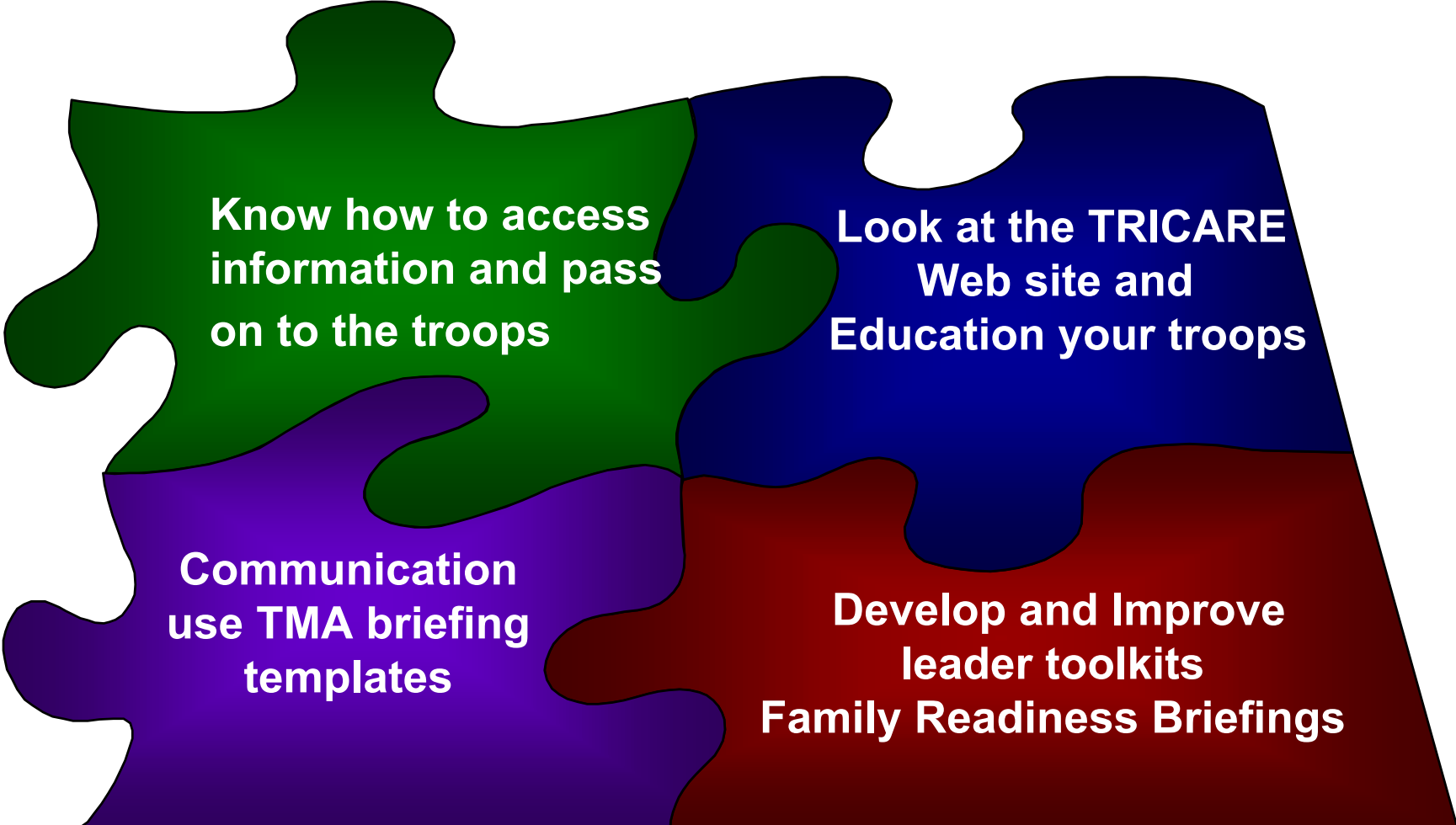


***They'll be ready to do this ...***



# How can you help TRICARE in the Information war?

Like the pieces of a puzzle...



Know how to access  
information and pass  
on to the troops

Look at the TRICARE  
Web site and  
Education your troops

Communication  
use TMA briefing  
templates

Develop and Improve  
leader toolkits  
Family Readiness Briefings



# Help us Tell the TRICARE Story....

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- Commander's Call
- Feedback Sessions
- New Comers Orientation Briefings
- Out-processing Briefings
- Enlisted Professional Development Sessions
- Special Interest Groups
- PME

**\*Take an active role in knowing and understanding your health care benefit!**



# www.tricare.osd.mil

TEXT ONLY

SEARCH

HELP

WHAT'S NEW

SITE MAP



Nominate a Hero Here

**TRICARE Beneficiaries**  
*Understanding Your  
TRICARE Benefit*

**TRICARE Management  
Activity**

**TRICARE Provider  
Information**

Toll Free Numbers

TRICARE Map

Conferences

Links/References

**Website Search**

Enter keyword

Search

*Please read this privacy  
and security notice.*



Browse A To Z

Go!



[Plain Talk about TRICARE: TRICARE Is Winning!](#)

*by Major General Leonard M. Randolph, Jr.*

*Deputy Executive Director, TRICARE Management Activity*

Health care is big news today in the United States, and the rising costs of health care are challenging every American and every American family. The good news for beneficiaries of TRICARE is that as their health care benefits are being continuously enhanced and improved, they do not absorb the big increases in costs now being experienced by many members of civilian health plans. (12 June 2002)

[TRICARE Prime Remote Pre-enrollment Begins for Active Duty Family Members Residing with Their Sponsors in Remote Locations](#)

23 July 2002 — Active duty family members, who reside with their sponsors in remote locations, may pre-enroll in the TRICARE Prime Remote for Active Duty Family Members (TPRADFM) program Aug. 1 to 20, 2002.

[DoD Announces Deadline Extension for Updating TRICARE For Life Eligibility](#)

19 July 2002 — The Department of Defense (DoD) announced today that the deadline for beneficiaries to update their eligibility in the Defense

July 24, 2002

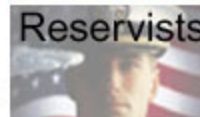
**One Stop  
for  
TRICARE  
Answers**



**Stakeholders  
Report**

**TRICARE  
For Life**

**Hot Issues  
Media  
Readiness  
Room**



# TRICARE UNIVERSITY



[\[text only\]](#)

★ [TRICARE Program Course](#)

★ [BCAC/HBA Course](#)

★ [Course Listing](#)

**Welcome** to TRICARE University, your online learning site for TRICARE service and management training. Here you will find courses that are specially designed to sharpen your skills, improve your performance, and enrich your knowledge on TRICARE management and services.



Thomas F. Carrato  
Executive Director,  
TRICARE Management  
Activity

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## About TRICARE University

TRICARE University provides standardized training and professional development opportunities for staff members and service partners of the TRICARE Management Activity. Our mission statement:

TRICARE University (TRICARE U) is a distance-learning vehicle designed to offer online courses about the various aspects of the TRICARE program and the TRICARE Management Activity (TMA). TRICARE U will offer the opportunity to obtain a better understanding of the TRICARE program by maximizing the use of technology-based education opportunities.

# If you **Educate** them first...





***They will be ready ...***

*To do this ...*



# Questions

